

POSITION*	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DR</i>	32	2/27
FORMALITY REVIEW	<i>ZR</i>	56551	05-09-01
RESPONSE FORMALITY REVIEW	<i>JM</i>	781	02-02-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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